## **Indiana Housing Finance Authority**

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X Application for "Condit	onal" Reservation of Rental Housing Financing
Application for <u>"Final"</u> A	Allocation of Rental Housing Financing
Date:	2/25/2005
Development Name:	Rink-Savoy
Development City:	Indianapolis
Development County:	Marion
Application Fee:	\$1,500
Building Identification Number (BIN):	
Application Number (IHFA use only)	
Applicable Percentage (IHFA use only)	

IN-05-02000

#### INDIANA HOUSING FINANCE AUTHORITY

#### Rental Housing Finance Application

X	Application for "Conditional" Reservation of Rental Housing Financing
	Application for "Final" Allocation of Rental Housing Financing

This Application for Rental Housing Financing (this "Application") is provided by the Indiana Housing Finance Authority (sometimes referred to herein as "IHFA" or the "Authority"), pursuant to Section 42 of the Internal Revenue Code and rules and regulations promulgated thereunder, as amended (the "Code"), and the current Qualified Allocation Plan, as adopted by the Authority and duly approved by the Governor of the State of Indiana (the "Allocation Plan"). BEFORE COMPLETING THIS APPLICATION, YOU SHOULD REVIEW THE ALLOCATION PLAN TO DETERMINE WHETHER YOUR PROPOSED DEVELOPMENT MEETS THE THRESHOLD CRITERIA REQUIRED BY THE AUTHORITY, AS SET FORTH IN THE ALLOCATION PLAN. Applications which fail to meet the minimum criteria will not be eligible for funding.

#### **APPLICATION PACKAGE SUBMISSION GUIDELINES**

No Application will be considered without the Applicant's submission of a brief narrative summary (limit 3 pages) describing the need for the Development within the community and the Development itself. This narrative should give an accurate depiction of how this development will benefit the particular community. Generally, the summary should include the following points:

Development and unit description

Amenities in and around the Development

Area's needs that the Development will help most

Community support and/or opposition for the Development

The constituency served by the Development

Development quality

Development location

Effective use of resources

Unique features

Services to be offered

- Your assistance in organizing your submissions in the following order will facilitate the review of your Application for a "Conditional" Reservation of Rental Housing Financing. Documentation included with the Application must be submitted in the order set forth on the Development Submission Checklist. Documentation for each applicable tabbed section of the application for which it applies should be placed in a legal size 1/3 tab cut manila file folder. Each file folder should be labeled with typewritten 1/3 cut file folder labels accordingly. A template to use to print labels for manila file folders is located in Schedule H. File folders should then be inserted in a 14 3/4"x 9 1/2" red file pocket with 5 1/4" expansion. See Schedule H.
- The Application form must be signed by the Applicant, duly notarized and submitted in <a href="mailto:triplicate">triplicate</a>
  <a href="mailto:originals">originals</a> [Form A (the application) only DO NOT SUBMIT TRIPLICATE ORIGINALS OF ANY OTHER PAGES], together with the required application fee. Inclusion of the items on the Development Submission Checklist in support of the Application is strongly encouraged and will likely impact the number of points for which you are eligible under IHFA's evaluation system of ranking applications, and may assist IHFA in its determination of the appropriate amount of credits that it may reserve for the development.
- 4 Applicants applying for IHFA HOME Funds and/or Trust Fund loan must submit each of the following in addition to the requirements noted above:
  - One (1) copy of the Rental Housing Finance Application (Application only)
  - One (1) original of the Trust Fund and/or HOME Funds Supplement application
  - Five (5) copies of the Trust Fund and/or HOME Funds Supplement application

THE TRANSPORT OF THE PARTY OF T			2-25-C
Threshold Items	Document Submitted Yes/No	Document Location (11ab)	
Development Feasibility			
Document Submitted:		Tab A	<u></u>
~ Application	Yes		
~ Third party documentation of souces, costs & uses of funds ~ 15 Yr. pro-forma (Housing, Commercial, combined)	Yes		
~ Other (List Below):	Yes		
Cultin (List Below).			
Highest locally elected official notified of the			Mayor's written response includes recap of financial support in tab C
development		T	
Documents Submitted:  ~ Form R	Yes	Tab C	-
~ Copy of letter/information submitted	Yes		
~ Returned Receipt from the certified mail	Yes		-
~ Written response from the local official	Yes		1
~ Other (List Below):			
Not-for-profit competing in any set-aside			
Document Submitted:		Tab B	
<ul> <li>Signed Board Resolution by the Not-for-profit's Board of Directors</li> </ul>	Yes		
Market Study prepared by a disinterested	Yes		
third party showing sufficient demand Document Submitted by market analyst to IHFA		Tab M	
<ol> <li>Applicant, Owner and/or Developer has not received \$750,000 or more in annual RHTCs and/or has successfully completed at least 1 Multi-familydevelopment in Indiana (issuance of IRS Form 8609)</li> </ol>			
Document(s) Submitted:		Tab L	
<ul> <li>List of all tax credit Developments and participation in the Development (Applicant, Owner &amp; Developer)</li> </ul>	Yes		
<ol><li>Costs expended to date are less than 50% of total development costs.</li></ol>			
Document Submitted:		Tab A	
~ Application	Yes		Also included are documents
7. Applicant, Developer, management agent, other development team members demonstrate financial, Developmental, and managerial capabilities to complete and			showing the non-profit is the sole owner of the General Partner
maintain property through compliance period.  Document(s) Submitted:		Tab D	
~ Financial Statements of GP or principals	Yes	1400	
~ Tax Returns of GP or principals			
~ Resume of Developer	Yes		
~ Resume of Management Agent	Yes		
~ Other (List Below): Property management agreement	Yes		
Completed Application with Application Fee	162		
o. Completed Application with Application Fee Document(s) Submitted:		Tab A	
~ Application (Form A)	Yes	- ab m	
~ Narrative Summary	Yes		
<ul> <li>Check for appropriate Application Fee</li> </ul>	Yes		

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Evidence of Site Control			City of Indianapolis is current owner
Document(s) Submitted:		Tab E	
~ Purchase Agreement			
~ Title commitment			
~ Warranty Deed			_
~ Long Term Lease			
~ Option			
~ Attorney's opinion			
<ul> <li>Adopted Resolution of the applicable commission</li> </ul>			_
Letter from the applicable governmental agency	Yes		_
~ Other (List Below):	Yes		
Project agreement with the City of Indianapolis		<u> </u>	
10. Development Site Information			The site plans showing the site is not
Documents Submitted:		Tab F	in flood plain or wetlands is in Phase
~ Schematics	Yes		I report
~ Perimeter Survey	Yes		i
~ Site plan (showing flood plain and/or wetlands)	Yes		]
~ Floor plans	Yes		1
11. Lender Letter of Interest			
- lender has reviewed the same application submitted			
or to be submitted by the Applicant to the Authority			
to which such letter of interest related;			
- lender expressly acknowledges that the			
development will be subject specifically to the			
"40-60" or "20-50" set-asides, and extended use			
restriction elections made by the Applicant			
- such lender has reviewed the Minimum Underwriting			
Criteria set forth in this Allocation Plan; and			
- any other special use restriction elections made by			
the Applicant, which give rise to additional points			
in this Allocation Plan.			
- the terms of the loan including loan amount, interest			
rate, and term of the loan			
Document Submitted:		Tab G	
~ Lender Letter of Interest	Yes	1000	·
12. Financing Not Yet Applied For	1.00	<del> </del>	
Document Submitted:		Tab C	
~ Certification of eligibility from Applicant	Yes	Tab G	-
	1168	<del> </del>	
13. Equity Letter of Interest			
<ul> <li>Such investor has reviewed the same application and</li> </ul>			
market study submitted or to be submitted by the	İ		
Applicant to the Authority in support of the Rental			
Housing Financing for the Development to which such			
letter of interest relates			
<ul> <li>Such investor expressly acknowledges that the</li> </ul>			
development will be subject specifically to the			
"40-60" or "20-50" set-asides, and extended use			
restriction elections made by the Applicant			
<ul> <li>such investor has reviewed the Minimum</li> </ul>			
Underwriting Criteria set forth in this Allocation Plan;			
and			
<ul> <li>any other special use restriction elections made by</li> </ul>			
the Applicant, which give rise to additional points		1	
in this Allocation Plan.			
Document Submitted:	1	Tab H	
<ul> <li>Equity Letter of Interest</li> </ul>	Yes		
14. Funding/Financing already awarded			
Document Submitted:		Tab G	
~ Copy of Award Letter			]

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<ol><li>Public and Private facilities are or will be</li></ol>			
accessible prior to completion			
Document Submitted:		Tab I	
<ul> <li>Map showing public and private facilities in relation</li> </ul>	Yes		1
to the development			· ·
16. Color photographs of the existing site and			
structures			
Document Submitted:		Tabl	
~ Photographs of the site	Yes	1 1001	1
17. Zoning			
Document Submitted:		Tab J	
~ Letter from zoning authority stating site is properly	Yes	1000	1
zoned (without need for additional variance)	1.00		
~ Copy of all approved variances	<del> </del>	<del></del>	
~ PUD documentation (if applicable)	<del></del>		
18. Utility Availability to Site	<del></del>		
Document(s) Submitted from appropriate entity:		Tob K	
~ Water	Yes	Tab K	1
~ Sewer	Yes		1
~ Gas	Yes		†
~ Electric	Yes		1
~ Current Utility Bills	1103		1
19. Compliance Monitoring and Evidence of	+		
Compliance with other Program Requirements  Documents Submitted:			
	<del> </del>	Tab L	
~ All development team members with an ownership	Yes		
interest or material participation in any affordable			
housing Development must disclose any non-			
compliance issues and/orloan defaults with all			
Authority programs.  ~ Affidavit from any principal of the GP and each		<del></del>	
development team member disclosing his/her interest	Yes		
in and affiliation with the proposed Development		•	
in and annation with the proposed Development			
			Mitigation plan including financing
20. Characteristics of the Site are suitable for			plan for asbestos and lead paint
			abatement in Tab F
the construction, rehabilitation and operation		ļ	
of the proposed Development			
<ul> <li>No Development will be considered if any buildings</li> </ul>		-	
are or will be located in a 100-year flood plain at the		ļ	
placed in service date or on a site which has			
unresolvable wetland problems or contains hazardous		-	
substances or the like that cannot be mitigated.		İ	
Documents Submitted:		Tab F	
~ Completed Environmental Phase I (addresses both	Yes		
flood plain and wetlands.)	<u> </u>		
~ FEMA conditional letter of reclassification	N/A		
~ Mitigation plan including financing plan	Yes		
~ Documentation from Civil Engineer	N/A		
~ Resume for Civil Engineer	N/A		
~ FEMA map	Yes		
21. Affirmative Fair Housing Marketing Plan			
Document Submitted:	<u></u> _	Tab N	
~ Form K	Yes		
22. Federal Fair Housing Act and Indiana			
Handicapped Accessibility Code			
Document Submitted:		Tab N	
~ Fair Housing Act Accessibility Checklist - Form E	Yes	FUD 14	
Y	1,22		

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23. Pre-1978 Developments (i.e. buildings)			2-25-0
Proof of Compliance with the Lead Based		l	
Paint Pre-Renovation Rule		-	
Document Submitted:		Tob N	
~ Form J	Yes	Tab N	-
	165		
24. Developments Proposing Commercial Areas			· ·
Document(s) Submitted:	ļ	Tab F	4
~ Detailed, square footage layout of the building and/or	N/A		1
property identifying residential and commercial areas  ~ Time-line for complete construction showing that all	N/A		-
commercial areas will be complete prior to the	IVIA		
residential areas being occupied			
25. RHTCs being used to Acquire the		ŀ	
Development			
Document Submitted:		Tab O	
~ Fair market appraisal (within 6 months)	N/A		
26. Rehabilitation Costs must be in Excess of			
\$7,000 per unit (Must be in excess of \$10,000			1
per unit if competing in the Preservation Set-aside)	1		
Document Submitted:		Tab O	
~ Capital Needs Assessment - Schedule H	Yes		1
~ Form C	Yes		1
27. Form 8821			
Provide only if Requested by IHFA		Tab Z	
			Explanation Tab G See
			analysis supporting costs, taxes,
28. Minimum Underwriting Guidelines			insurance in Tab A.
~ Total Operating Expenses - supported in Market Study	Yes		
<ul> <li>Management Fee - 5-7% of "effective gross income"</li> </ul>	Yes		1
1-50 units 7%,			
51-100 units 6%, and			
100+ units 5%			•
~ Vacancy Rate 6-8%	Yes		7
~ Rental Income Growth 1-3% /yr	Yes		7
<ul> <li>Operating Reserves - four (4) to six (6) months</li> </ul>	Yes		1
(Operating Expenses plus debt service)			
~ Replacement Reserves per unit	Yes		]
New Construction: \$250 - \$300	i		
Rehabs: \$300 - \$350	<u> </u>		1
~ Operating Expense Growth 2-4% /yr	Yes		_
~ Stabilized debt coverage ratio 1.15 - 1.35	Yes	1	
(Maintain at least a 1.1 througout Compliance Period)	10.04.0		_[
~ Minimum cash for Developments with no debt	N/A	1	
\$250 per unit		<u> </u>	4
Document(s) Submitted:	<u> </u>	Tab A	4
~ Data Supporting the operating expenses and	Yes		
replacement reserves	Yes		4
~ Documentation of estimated property taxes & insurance	Yes		4
~ Detailed explanation why development is	N/A		
underwriting outside these guidelines	<u> </u>		4
<ul> <li>Third party documentation supporting explanation</li> <li>Other</li> </ul>			-
- Oulei		1	
20. 0	ļ		
29. Grants/Federal Subsidies		1	
Document Submitted:		Tab G	
~ Explanation of how the funds will be treated in Eligible	Yes		
Basis, the reasonableness of the loan to be repaid,		1	
and the terms of the loan.	1	1	

30. Credits requested does not exceed the	Yes		The formula on page 43 Determination of Reservation Amount Needed does not take into consideration the deferred development fee in calculating the amount of credits. We are aware of the credit per unit limit and include a supplemental calculation.
30. Credits requested does not exceed the maximum credit per unit:  1-35 units = \$8,180 (QCT \$10,635)  36-60 units = \$7,670 (QCT \$9,970)  61-80 units = \$7,160 (QCT \$9,305)  Over 80 units = \$6,645 (QCT \$8,640)			
Credits requested above the maximum MUST PROVIDE:  ~ Clear and convincing evidence for the need of additional credits  ~ Applicant has exhausted all sources of financing  ~ Provide third-party documentation			
Document Submitted:		Tab A	
~ Letters from Lenders	N/A		
~ Other (List Below):			
31. Request does not exceed \$750,000 and owner, developer or applicant has not received more than \$1,500,000 per year (This excludes tax exempt bonds)			
Document Required:	<u> </u>	Tab A	
~ Application	Yes		
32. Developer Fee, including consulting fee, is within guidelines		T-1: 0	Development agreement in Tab G
Document(s) Submitted:  ~ Deferred Development Agreement/Statement	Yes	Tab G	
~ Not-for-profit resolution from Board of Directors	Yes		1
allowing a deferred payment			
33. Contractor Fee is within guidelines	Yes	1	
34. Development satisfies all requirements of Section 42		**	
Document(s) Submitted:  ~ Completed and Signed Application with certification	Yes	Tab A	
35. Private Activity Tax-Exempt Bond Financing Documents Required:	N/A		
~ Inducement Resolution ~ Attorney's Opinion			
36. Not-for-profit set-aside	+	Tob D	
Documents Required:		TabB	
~ Articles of Incorporation	Yes		]
~ IRS documentation 501( c)(3) ~ NFP Questionnaire	Yes	ļ	1
~ NFP Questionnaire  36. Additional Documents Submitted	Yes		
List documents:		Tab Z	
D. C.			
A SALEAN FRANCISCO			
1. Rents Charged			We have set-aside 18 units at 30% and 2 units at 40%. Only 7 units are needed to meet the 11% set-aside at 30%. When you add the excess eleven units, (18 units set-aside at 30% less 7 units to score five points at 30%) (60 units times 11% equals 6.6 units rounded to 7) to the two additional units we set-aside at 40% that meets the 21%+ scoring threshold of five points (11+2= 13 units is 21.67% of 60 units)
A. Lower Rents Charged			
% at 30% Area Median Income Rents	_		
1. 5-10% (2 points) 2. 11% + (5 points)		ļ	
2. 11% + (5 points)	5		1
% at 40% Area Median Income Rents			]
1. 15 - 20% (2 points) 2. 21% + (5 points)	5		
	-	1	
		<u> </u>	1

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% at 50% Area Median Income Rents		1	2-7-1-III
1. 20 - 30% (2 points)			]
2. 31 - 50% (5 points)			1
3. 51% + (10 points)	10		1
			1
B. Market Rate Rents			
1. 5 - 10% <b>(2 points)</b>			1
2. 11% + (5 points)			7
			╡
Subtotal (25 possible points)	20		
Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Sa			
2. Contituency Served	ļ		
2. Conditionity derived			
Homeless Transitional (0-5 points)	0	<del></del>	-
Document Required:	<del>                                     </del>	<del></del>	-
written referral agreement signed and agreed to by			
all parties - Place in Tab R			
	1		
~ Resume of oganization providing services - Tab R	<del> </del>		4
2. Persons with Disabilities (0-5 points)	5		4
Document Required:			
~ written referral agreement signed and agreed to by	İ	1	
all parties - Place in Tab R			1
~ Resume of oganization providing services - Tab R			
Subtotal (10 possible points)	5		
3. Development Characteristics		1	
, <u>,</u>	1	1	
A. Unit Types	1	ŀ	
1. 30% units 2 bedrooms, or (2 points)	<del>                                     </del>		-
2. 45% units 2 bedrooms (4 points)			4
3. 15% units 3 bedrooms, or (2 points)		<del> </del>	4
4. 25% units 3 bedrooms (4 points)	<del></del>		4
5. 5% units 4 bedrooms, or (2 points)			4
			4
		<u> </u>	4
7. Single Family/Duplex (3 points)			
D. Development Design			ł
B. Development Design			
1 10 amonition in Column 4 (4 - 1-4)	<del> </del>		4
1. 10 amenities in Column 1 (1 point)	1 1		_
2. 5 amenities in Column 2 (1 point)	1		]
3. 3 amenities in Column 3 (1 point)	1		]
Document Required:			1
~ Form B - Place in Tab F			
C. Universal Design Features		1	
Ten (10) Universal Design Features (1 point)	1		1
Document Required:		1	1
~ Form S - Place in Tab F		1	
D. Unit Size	1	1	
1. Efficiency/0 BR > 375 sq ft/Rehab 350 sq ft (1 point)			
2. 1 BR > 675 sq ft/Rehab 550 sq ft (1 point)		·	-
3. 2 BR > 875 sq ft/Rehab 680 sq ft (1 point)	1 1	-	All twos are > 600 == #
	-		All twos are > 680 sq ft
			4
	<del></del>	-	4
Document Required:	1		-
~ Form H - Place in Tab F		1	

		······································	2
E. Existing Structure			
1. % of total development that was converted from a			
vacant structure			
25% (1 point)			
50% (2 points)			1
75% (3 points)			
100% (4 points)	4		
Required Document:		ŀ	1
~ Form I - Place in Tab O		l	
,			
F. Development is Historic in Nature			]
Listed on the National Register of Historic Places (1 point)		<u> </u>	
Required Document:			] 1
~ Letter from the National Park Service or verification			
of listing from their website - Place in Tab U			
			Letter, 11-10-04, from Diebold at DNR to Reusze in Tab U. Part I is not
			required if building is individually listed
			on the National Register and the Rink-
2. Utilizes Historic Tax Credits(2 points)	2		Savoy buildings are.
Required Document:	<u>~</u>	<del>                                     </del>	Cavey buildings are.
Copy of historic application and approved Part I			
Place in Tab U		1	į
i ido iii ido o		[	
G Preservation of Evicting Affordable Hausing		†	į l
G. Preservation of Existing Affordable Housing		ļ	. l
RHTC that have/will Expire(3 points)  Promised Recomments:		ļ <u></u> -	4 <b>l</b>
Required Document:		}	]
~ Statement from Applicant - Place in Tab U		ļ	<u>.</u>
2. HUD or USDA Funded (1-3 points)			_
Required Document:			
<ul> <li>Letter from HUD or USDA stating priority designation</li> </ul>			[
Place in Tab U			·
Revitalization Plan for a HOPE VI grant (3 points)			]
Required Document:			Ţ <b>l</b>
~ Copy of Revitalization Plan and award letter for the			
HOPE VI funds - Place in Tab U		I	
Preservation of any affordable housing Development (2 points)	2	<u> </u>	City preservation project agreement in Tab L
Required Document:			]
~ Third Party documentation - Place in Tab U			
		l	
E. Energy Efficiency Requirements			
HVAC and Windows (1 point)		<del>                                     </del>	† I
2. Three (3) Appliances (1 point)	1	<b></b>	-  I
Required Document:		<del></del>	- <del> </del>
~ Form G & Supporting Documentation - Place in Tab F		[	1
, sim o a supporting bootine itation - riace it tab r			ļ <b>l</b>
Subtotal (35 possible points)	14		
	-		
4. Financing		İ	]
			]
A. Government Participation			ļ <b>1</b>
Up to 1% of total development costs (1 point)			1
2. Over 1% - 3% of total development costs (2 points)			1
3. Greater than 3% of the total development costs (3 points)	3		† <b>!</b>
Required Document:		<del>                                     </del>	i !
~ Letter from the appropriate authorized official approving		[	]
funding and stating the amount of monetary funding		}	
Place in Tab C		ł	1 I
			1
B. RHTCs as Part of the Overall Financing Structure		1	1
		<del> </del>	- <b> </b>
1. 70% - 80% of total development costs (1 point)		<b></b>	-  <b> </b>
2. 60% - 69.99% of total development costs (2 points)	2		<u> 1</u>
3. < or equal to 59.99% of total development costs(3 points)			_l
Subtotal (6 possible points)	. 5 .		
	<del></del>		. I

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5. Market			7.7.4.1.
A. Difficult to Develop Area - QCTs (3 points)			
Required Document:		 1	
~ Census Tract Map - Place in Tab I			
B. Local Housing Needs			
1. 1/2% -1 1/2% and does not exceed 1350 units (1.5 points)			
< 1/2% and does not exceed 800 units (3 points)     Required Document:			
~ Form F With a list of all tax credit and bond developments. Place in Tab C			
C. Subsidized Housing Waiting List (2 points)	2	1	
Required Document:		1	
<ul> <li>Agreement signed by both the owner and the appropriate official for the local or regional public housing represenative. Place in Tab R</li> </ul>			
D. Community Revitalization Preservation (3 points)	3		
Required Document:  ~ Letter from highest local elected official - Tab U  ~ Certification from Architect - Tab U  ~ Hope VI approval letter from HUD - Tab U			
E. Lease Purchase (1 point)			
Required Documents:			
<ul> <li>Detailed outline of lease purchase program</li> <li>Lease-Purchase agreement signed by all parties.</li> <li>Place in Tab S</li> </ul>			
Subtotal (12 possible points)	5		
6. Other		<u> </u>	
A. Community Development (1-2 points)			
Required Document:	2		
Form R fully completed and signed by highest local official (or authorized designee) Place in Tab W			
B. Minority/Women Participation (2 points)			
Required Document:  ~ Certification from Indiana Department of Administration Place in Tab T  ~ All applicable Development, management & contractor agreements (w/fee structure) - Tab T			
C. Unique Features or Circumstances (3 points)	3		
Required Document:  ~ Detailed description of all unique aspects fo the development. Place in Tab P			
C. Services			
Commitments for Moderate Services (1 point)			
Commitments for Exceptional Services (2 points)	2		
Required Document:  ~ Written agreements signed by all parties. Place in  Tab Q			
D. Technical Correction Period (3 points)	3		
Development must pass Threshold without any technical errors or incomplete information			· :
Subtotal (12 possible points)	10		
ludelle exceptionen et en en (100 coesto) e pointe ex-		CESTS BADE CONTRIBUTOR SERVINGS	rangering ber beragnaman an

Rink-Savoy

Se	ect Financing Type (Check all that apply)	Set-Aside(s) MUST selec (Applicable for Rental Ho	t all that apply. See QAP using Tax Credits ONLY)
	Rental Housing Tax Credits (RHTC)      Multi-Family Tax Exempt Bonds      Low Income Housing Trust Fund     (MUST complete Trust Fund Supplement. See Form R)      IHFA HOME Investment Partnerships     (MUST complete HOME Supplement. See Form S)	X Not-for-Profit	<ul> <li>X Large City</li> <li>Rural</li> <li>X Lowest Income</li> <li>X Persons with Disabilities</li> </ul>
Α.	Development Name and Location  1. Development Name Rink-Savoy		
	Street Address 401 N. Illinois/32 W. Vermont Str		
	<del></del>	Marion Stat	e <u>IN</u> Zip
	2. Is the Development located within existing city limits?		X Yes No
	If no, is the site in the process or under consideration for	r annexation by a city?	Yes No
	3. Is development located in a Qualified Census Tract or a	difficult development area?	Yes X No
	a. If Yes, Census Tract#	If No, Census Tract#	3541
	b. Is development eligible for adjustment to eligible basi	s?	Yes X No
	Congressional District7th State Senate District	33 State House District	99
В.	Funding Request (** for Initial Application Only)		
	Total annual credit amount requested with this Application     previously approved by IHFA Board for the development	on (Final Allocation request ca	n not exceed amount
	2. Total annual credit amount requested from Persons with	Disabilities set-aside	\$ 45,056
	3. Percentage of units set-aside for Persons with Disabilities	es <u>10%</u>	
	4. Total amount of Multi-Family Tax Exempt Bonds request	ted with this Application	\$ -
	5. Total amount of IHFA HOME funds requested with this A	application \$	<u>-</u>
	6. Total amount of Trust Fund loan requested with this App	lication \$ -	_
	7. Have any prior applications for IHFA funding been subm	itted for this Development?**	Yes X No
	If yes, please list the name of the Development(s), date amount) and indicate what information has changed from of the application package.	of prior application, type of fun n the prior application. Place	iding request (with information in Tab Y
foot	notes:		

	8. Total annual tax credit amount requested with all applications (including this Application) submitted to the Authority in 2005 (current year) \$ 450,556 **
	9. Total annual tax credit amount awarded with all applications submitted to the Authority in
	10. Total Multi-Family Tax Exempt Bonds requested with all applications (including this Application) submitted to the Authority in
	11. Total Multi-Family Tax Exempt Bonds awarded with all applications submitted to the Authority in 2005 (current year) \$ - **
C.	Types of Allocation/Allocation Year
	1. Regular Allocation
	All or some of the buildings in the development are expected to be placed in service (date). For these buildings, the <u>Owner</u> will request an allocation of (current year) credits this year for:
	New construction, <u>or</u> Rehabilitation, <u>or</u> Acquisition and rehabilitation.
	2. Carryforward Allocation
	All or some of the buildings in the development are expected to be placed in service within two years <u>after</u> the end of this calendar year <u>2005</u> (current year), but the <u>Owner</u> will have more than 10% basis in the development before the end of this year, but in any event no later than 6 months from the date of the allocation if the allocation is received within the last 6 months of the calendar year. For these buildings, the Owner will request a <u>carryforward</u> allocation of <u>2005</u> (current year) credits pursuant to Section 42(h)(1)(E) for:
	New construction, or  Rehabilitation, or  Acquisition and rehabilitation (even if you acquired a building this year and "placed it in service" for the purpose of the acquisition credit, you cannot receive Form 8609 for acquisition credits on the building until the year for which the Form 8609 is issued for that building once the rehabilitation work is "placed in service" in (Year)). See Carry Over Agreement.
	3. <u>Federal Subsidies</u>
	Federal Subsides may include: Tax Exempt Bonds, Project Based Section 8, HOME, CDBG, Ect.
	The development <u>will not</u> receive federal subsidies  The development <u>will receive federal subsidies</u> for all buildings or some buildings
	List type of federal subsidies:
	HOME funds will be structured to remain in eligible basis.
foot	notes:

## D. Applicant/Ownership Information

Pa Qı	Applicant an IHFA State articipating Jurisdiction (nualified not-for-profit? public housing agency (P	on-state) Certified CHDO?	Yes X No X Yes No X Yes No Yes X No		
	a. Name of Organization	on Riley Area Development Corporation (RADC)			
	Contact Person	Bill Gray			
	Street Address	430 Massachusetts Avenue, Suite LL1			
	City <u>Indian</u>	apolis State IN Zip 46204	4		
	Phone <u>317 63</u>	37 8996 Fax 317 637 9235	····		
	E-mail Address	bgray@rileyarea.org			
	Applicant's Resum	ne and Financials must be attached			
	b. If the Applicant is no	ot the Owner, explain the relationship between the Ap	plicant and the Owne		
RADC will be sole owner of the General Partner of the Limited Partnership					
	TO IDO WIII DE GOIC CWIT	or the constant diales of the Elimited Landership			
	c. Has Applicant or an	y of its general partners, members, shareholders or p y under the federal or state law of the United States?	rincipals ever been Yes XNo		
	c. Has Applicant or any convicted of a felong  d. Has Applicant or any converted a party (as a second converted to the conve	y of its general partners, members, shareholders or p	Yes X No		
	<ul> <li>c. Has Applicant or an convicted of a felon</li> <li>d. Has Applicant or any cever been a party (as a applicable bankruptcy</li> </ul>	y of its general partners, members, shareholders or p y under the federal or state law of the United States? of its general partners, members, shareholders or principals a debtor) in a bankruptcy proceeding under the	Yes XNo		
	<ul> <li>c. Has Applicant or any convicted of a felon</li> <li>d. Has Applicant or any cever been a party (as a applicable bankruptcy)</li> <li>e. Has Applicant or an</li> </ul>	y of its general partners, members, shareholders or p y under the federal or state law of the United States? of its general partners, members, shareholders or principals a debtor) in a bankruptcy proceeding under the law of the United States?	Yes XNo		
	<ul> <li>c. Has Applicant or any convicted of a felony</li> <li>d. Has Applicant or any converted applicable bankruptcy</li> <li>e. Has Applicant or any converted applicable bankruptcy</li> <li>d. Defaulted on any</li> </ul>	y of its general partners, members, shareholders or p y under the federal or state law of the United States? of its general partners, members, shareholders or principals a debtor) in a bankruptcy proceeding under the law of the United States? y of its general partners, members, shareholders or p	Yes XNo		
	<ul> <li>c. Has Applicant or any convicted of a felony</li> <li>d. Has Applicant or any convert been a party (as a applicable bankruptcy)</li> <li>e. Has Applicant or any</li> <li>1. Defaulted on any</li> <li>2. Defaulted on any</li> </ul>	y of its general partners, members, shareholders or p y under the federal or state law of the United States?  of its general partners, members, shareholders or principals a debtor) in a bankruptcy proceeding under the law of the United States?  y of its general partners, members, shareholders or p y low-income housing Development(s)?  y other types of housing Development(s)?	Yes XNo		
	<ul> <li>c. Has Applicant or any convicted of a felony</li> <li>d. Has Applicant or any converted a party (as a applicable bankruptcy)</li> <li>e. Has Applicant or any</li> <li>1. Defaulted on any</li> <li>2. Defaulted on any</li> <li>3. Surrendered or converted and or the mortgagor</li> <li>f. If you answered yes</li> </ul>	y of its general partners, members, shareholders or p y under the federal or state law of the United States?  of its general partners, members, shareholders or principals a debtor) in a bankruptcy proceeding under the law of the United States?  y of its general partners, members, shareholders or p y low-income housing Development(s)?  y other types of housing Development(s)?	Yes X No		
	<ul> <li>c. Has Applicant or any convicted of a felony</li> <li>d. Has Applicant or any converted a party (as a applicable bankruptcy)</li> <li>e. Has Applicant or any</li> <li>1. Defaulted on any</li> <li>2. Defaulted on any</li> <li>3. Surrendered or converted and or the mortgagor</li> <li>f. If you answered yes</li> </ul>	y of its general partners, members, shareholders or p y under the federal or state law of the United States? of its general partners, members, shareholders or principals a debtor) in a bankruptcy proceeding under the law of the United States?  y of its general partners, members, shareholders or p y low-income housing Development(s)?  y other types of housing Development(s)?  conveyed any housing Development(s) to HUD  conveyed any housing Development(s) to HUD	Yes X No		

Owner Information	Legally formed X To be formed
a. Name of Owner	Rink-Savoy, LP
Contact Person	Bill Gray
Street Address	430 Massachusetts Avenue, Suite LL1
City <u>Indianapol</u>	lis State IN Zip 46204
Phone 317 687 8	996 Fax <u>317 637 9235</u>
E-mail Address	bgray@rileyarea.org
Federal I.D. No.	to be applied for
Type of entity:	X Limited Partnership
	Individual(s)
	Corporation
	Limited Liability Company
	Other
X Owner's Organizational Do Owner's Resume and	cuments (e.g. partnership agreement) attached Financials attached.
Provide Name and Signature for <u>each</u>	1 Authorized Signatory on behalf of the Applicant.
William Gray, Executive Director     Printed Name & Title	Signature
W. Rober Bates, Senior Vice Presd	lent de la company de la compa
Printed Name & Title	Signature
3. Printed Name & Title	Signature
4. Printed Name & Title	
	Signature
5. Printed Name & Title	Signature
	Rink Savoy 2-25-05
footnotes: Draft documents showing R	ADC is sole GP in Tab D

b. List all that have an ownership interest in Owner and the Development. Must <u>include</u> names of <u>all</u> general partners (including the principals of each general partner if applicable), managing member, controlling shareholders, ect.

						Province bili
			RADC Rink Savoy, Inc.	General Partner	637-8996	0.10%
			RADC	Owns 100%of GP	637-8996	
( angajari						
	4.1					
		i v				
			ESIC	Equity purchaser	410 772 2501	99.99%
						· · · · · · · · · · · · · · · · · · ·
	200					
	C.		wner or any of its general partners, me lony under the federal or state laws of			een convicted Yes X No
	d.		ner or any of its general partners, member			/ (as a
			in a bankruptcy proceeding under the applited States?	icable bankruptcy law	s of	Yes X No
	e.	Has O	wner or any of its general partners, me	embers, shareholde	ers or principals:	
		1. Def	aulted on any low-income housing De	velopment(s)?		Yes X No
		2. Def	aulted on any other types of housing [	Development(s)?		Yes X No
			rendered or conveyed any housing De he mortgagor?	evelopment(s) to Hi	מע	Yes X No
			inswered yes to any of the questions in		, then please provide a	additional

information regarding these circumstances in Tab L.

footnotes:		

## E. Prior Property Owner Information

	Owner's acquisition.	o owned the property immediately prior to Applicant or
	Name of Organization City of Indianapolis	
	Contact Person Bruce Baird	
	Street Address 2042 City County Buildin	ng
	City Indianapolis State	<u>IN</u> Zip <u>46204</u>
	Type of Entity: Limited Partnership	Individual(s)
	Corporation	X Other City
	2. What was the prior use of the property?	Vacant, former project based Section 8 development
	3. Is the prior owner related in any manner to the	Applicant and/or Owner or part of the development team?  Yes X No
	If yes, list type of relationship and percentage	of interest, if applicable.
F.	Applicant/Owner Experience	
	principals, and each development team member h Exempt Bonds, HOME Funds, 501(c)3 Bonds, Tr development was a rehabilitation of an existing de	r which the Applicant, Owner, members, shareholders, nerein have received an allocation of RHTC, Multi-family Tax rust Fund, and/or CDBG. Please identify whether each evelopment or new construction, the award amount, the ling Identification Number (BIN), grant number, ect.) Please
G.	Development Team Information	
	Attorney Gareth Kuhl	· · · · · · · · · · · · · · · · · · ·
	Firm Name Ice, Miller	
	Phone 236-5885	Fax <u>592-4686</u>
	E-mail Address <u>gareth.kuhl@icemiller.cc</u>	<u>om</u>
	Bond Counsel (if applicable)  N/A  N/A	
	Firm Name	
	Phone	Fax
	E-mail Address	
foo	tnotes:	

3.	Developer (contact	t person) Bill Gray	or Robert E	Bates "	
	Firm Name	RADC or Mansur	****		
	Phone <u>637-8996</u>	or 464-8200	Fax	637-9235	
	E-mail address	bgray@rileyarea.c	org		
4.	Accountant (conta	ct person) <u>Joel Ga</u>	uthier $\sqrt{}$		
	Firm Name	Gauthier & Kimme	rling		
	Phone <u>636-3265</u>		Fax	636-2156	
	E-mail address	jgauthier@gkacco	unting.com		***
5.	Consultant (contact	ct person) Jim Higg	gs		
	Firm Name	James Higgs Asso	ociates, Inc.	*****	
	Phone 317 357 4	867	Fax	317 357 4967	
	E-mail address	jhiggs4@comcast	net		
6.	Management Entit	ty (contact person)	W. Rober	t Bates 🦯	
	Firm Name	MRE Residential	Managemen	t, LLC	
	Street Address	10 West Market S	treet, Suite	700	
	City Indianapo	olis	State	IN	Zip Code <u>46204</u>
	Phone 317 464 8	3200	Fax	317 464 8201	
	E-mail address	wbates@mresi.co	m	***************************************	
7.	General Contracto	or (contact person)	Michael J	. W. Greven	
	Firm Name	Mansur Constructi	on Services		
	Phone 317 464 8	200	Fax	317 464 8201	
	E-mail address	mgreven@mresi.c	om		
8.	Architect (contact	person) James (	Cordell		
	Firm Name	Heartland Design		· · · · · · · · · · · · · · · · · · ·	
	Phone 317 636 6	360	Fax	317 636 6361	
	E-mail address	heartdesign@sbco	global.net		
	If the Developme	nt will be utilizing I	viulti-family	Tax Exempt Bonds, y	you must_
factures		ne entire developn	ient team ir	addition to above.	
footnote	೮ಎ.				

Rink-Savoy 2-25-05

	If any member of the development team has any financial or other interest, directly or indirectly, with another member of the development team, and/or any contractor, subcontractor, or person providing services to the Development for a fee, then a list and description of such interest(s) should be provided in TAB L. (Check appropriate box)								
		No identities	s of interest		X Yes, ident	ities of inte	erest		
Н.	No	t-for-profit invol	vement						
	Ov ow	ticles of Incorpora vner is already for rnership interest o ocation Plan). Tr	rmed. To qu of Owner mu	ualify for the est be owned	not-for-profit se d by a "qualified	t-aside, 10 not-for-pro	00% of the geo	neral parl on" (as de	tner efined in the
	2.	Identity of Not-fo	or-profit						
		The not-for-prof	īt organizati	on involved	in this developn	nent is:			
		X the Owner			X the Applic	ant (if diffe	rent from Ow	ner)	Other
		Name of Not-for	r-profit	RADC				***************************************	····
		Contact Person		Bill Gray	·····				
		Address	430 Massa	ichusetts Av	venue, Suite LL1			·	
		City	Indianapol	is	-	State	IN	Zip	46204
		Phone	637-8996	*****		. Fax	637-9235		
		E-mail address	bgray@rile	yarea.org	······································				
I.	Sit	e Control							
	1.	Type of Site Co	ntrol by App	licant					
		Applicant contro	ols site by (s	elect one of	f the following):*				
		Warranty Do X Option (exp Purchase C Long Term	iration date: ontract (exp	iration date:	6_)**	.)** .)**			
		* If more than or and submit a se and type of con	parate shee	t specifying	nent <u>and</u> more th each site, numl	an one for per of exist	m of site con ting buildings	trol, pleas on the si	se so indicate te, if any,
		** Together with the identity of th	n copy of title ne current O	commitme wner of the	ent or other infon site.	mation sati	isfactory to th	e Authori	ty evidencing
		Please provide	site control	documentati	ion in Tab E.				
foo	tnote	es: Site control i	s through a	project agre	ement with the	City of Indi	ianapolis		

	2.	Timing of Acquisition by Owner Select One:	Z-Z:					
		Applicant is Owner and already controls site by either deed or long-term lease or						
		X Owner is to acquire the property by warranty deed (or lease for period no shorter than period property will be subject to occupancy restrictions) no later than 12-31-05 *						
		* If more than one site for the development andmore than one expected date of acquisition by Owner, please so indicate and attach a separate sheet specifying each site, number of existing buildings on the site, if any, and expected date of acquisition by Owner of each site.						
	3.	Site Information						
		a. Exact area of site in acres 0.249						
		b. Is site properly zoned for your development without the need for an additional variance?  Zoning type CBDS-RC						
		c. Are all utilities presently available to the site?						
		d. Who has the responsibility of bringing utilities to the site?  When? (month/year)						
		e. Has locality approved the site plan?						
		f. Has locality issued building permit?						
J.	Sca	attered Site Development						
	to I	sites are not contiguous, do all of the sites collectively qualify as a scattered site Development pursuant IRC Section 42(g)(7)? Yes No O market rate units will be permitted)						
K.	Ac	quisition Credit Information						
	1.	All buildings satisfy the 10-year general look-back rule of IRC Section 42(d)(2)(B) and the 10% basis/\$3000 rehab costs per unit requirement.						
	2. If you are requesting an acquisition credit based on an exception to this general rule [e.g. Section 42(d)(2)(D)(ii) or Section 42(d)(6)], then, other than the exception relating solely to the prior use of the property as a single family residence by the Owner, an attorney's opinion letter in a form satisfactory to the Authority must accompany this Application specifically setting forth why the buildings qualify for an exception to the 10-year rule.							
	3.	Attorney's Opinion Letter enclosed.						
L.	Rel	habilitation Credit Information (check whichever is applicable)						
	1. X All buildings in the development satisfy the 10% basis requirement of IRC Section 42(e)(3)(A)(i).							
	2. All buildings in the development satisfy the minimum \$3000 rehab cost per unit requirement of IRC Section 42(e)(3)(A)(ii).							
	3. All buildings in the development qualify for the IRC Section 42(e)(3)(B) exception to the 10% basis requirement (4% credit only).							
foo	tnote	9s:						

				<-Savoy 2-25-05
	4.	All buildings in the development qualify for the IRC Section 42(f)(5)(B)(ii)(II) exception to th \$3000 per unit requirement (\$2000 per unit required instead; 4% credit only).	e .'	2-25-00
	5.	Different circumstances for different buildings: see above, attach a separate sheet and exp for each building.	lain	
M.	Re	location Information. Provide information concerning any relocation of existing tenants.		
	1.	Does this Development involve any relocation of existing tenants?  Yes	ΧN	<b>1</b> 0
		Will existing tenants be relocated within the development during rehabilitation?	ı [_	lo
		If yes to either question above, please describe the proposed relocation plan and/or assistance Please provide in Tab Z.	∋.	

footnotes:

## N. Development Information

<ol> <li>Rental Housing Tax Credit and/or Multifamily Tax-Exempt Bond Unit Breakdowns</li> </ol>					
Indicate if the development will be subject to additional income restrictions and/or rent restrictions:					
	Income Restrictions (Final Application only - for Developments funded prior to 2002)				
X	Rent Restrictions				

		na manae	e di bermi			terion in	Arii Hun	
				diam'r 19				
	# Units		16	2			18	30%
	# Bdrms.	0	16	4	0	0	20	29%
	Sq. Footage		552	968				
	Total. Sq.	ļ	8,832	1,936			10,768	
Zajakin ka	Footage							
	# Units		2				2	3%
	# Bdrms.	0	2	0	0	0	2	3%
	Sq. Footage		611					
	Total. Sq.		1,222				1,222	·
						<u> </u>	-,	
	# Units		26	.5			31	52%
	# Bdrms.	0	26	10	0	0	36	52%
	Sq. Footage		600	922				
	Total. Sq.		15,600	4,609			20,209	
THE RESERVE AND PARTY OF THE PA	8 COD1896 1			1			,	
	# Units		7	2			9	15%
Conditions	# Bdrms.	0	7	4	0	0	11	16%
	Sq. Footage		611	1,151				
	Total, Sq.		5,498	2,302			7,800	
	Footage						,,,,,,	
137/64/11/4	# Units						0	0%
	# Bdrms.	0	0	0	0	0	0	0%
	Sq. Footage							
	Total. Sq.						0	
	Footage							
exeministeni	# Units	0	51	9	0	0	60	100%
	# Bdrms.	0	51	18	0	0	69	100%
	Sq. Footage	0	31,152	8,847	0	0	39,999	100%

<sup>\*</sup> No market rate units are permitted in scattered site developments per IRS Code Section 42(g)(7)

footnotes:			
	 ***************************************	···	

## 2. Structure and Units

a. List unit type(s) and number of bedroom(s) by bedroom size.

Unit Type	0-1 Bedroom	2 Bedrooms	3 Bedrooms	4 Bedrooms
Substantial Rehabilitation				
Single Family (Infill) Scattered Site				
Historic Rehabilitation	51	9		
New Construction				

b.	The Development's structural fea	tures are (check all	that apply):			
X	Row House/Townhouse Detached Two-Family Crawl Space Elevator	Garden Apartm Slab on Grade Age of Structure Number of stories	107 years R	Basemer ink and 104	years Savoy	7 Rink is for sale condos
C.	The type(s) of unit is (are):					
X	Standard Residential Rental Transient Housing for Homeless Single Room Occupancy Housin Other		No. of Units No. of Units No. of Units No. of Units	60		
d.	Gross Residential Floor Area (res	sident living space or	nly) <u>3</u> 8	5,583	Sq Ft.	
e.	Gross Common Area (hallways, o	community space, ed	ot.) 22	2,771	Sq Ft.	
f.	Gross Floor Area (all buildings) [d	+ ej	<u>58</u>	3,354	Sq Ft.	
g.	Gross Commercial Floor Area (if	applicable)	_	0 :	Sq Ft.	
	(Use additional sheets if necessa All commercial uses must be inclu Commitment. Additional informat detailing the square footage layou and commercial area; a time-line will be completed prior to the residual commercial area.	uded in the Declarati ion must be provide at of the building and for complete constru	d in Tab F of t /or property, i ction showing	he application dentifying al	on package I residential	
i. '	What percentage of the Developm has been completed, based on the the total estimated development of 5 % complete	e actual costs and e		rred to date	• '	
j.	Total number of residential building	gs in the Developme	nt:	1	building(s)	
k.	Will the development utilize a mar			Yes [	X No	
	If yes, how will the unit be conside	ered in the building's	applicable fra	action?	Tax Credit Unit Common Area	
the cre	If yes, Number of units requested DTE: If the manager's unit will be same building. Developments edit units as manager's, security der Section 42 guidelines.	with market rate u	nits will not l	be allowed t	ust remain in to designate tax	
footnotes:	The top floor of the Rink building i	s for sale condos of	4.614 S. F. a	nd is not incl	uded above	

vator
sident services space and programming
ntrolled entry into the building
c. Please list site amenities (including recreational amenities).
o. I load list site ariemade (molading redicational amenaes).
tio area
rbecue grill
zebo
Are the amenities including recreational amenities for both low income and market rate units the sam
X Yes No
If no, attach a separate sheet and explain differences in Tab P.
Energy Efficiency
Energy Efficiency
Are all the units within the Development equipped with Energy Star related materials and appliances?
X Yes No
If yes, please provide documentation in Tab F of the application package.
ls the Development currently a vacant structure being converted into affordable housing?
If yes, please provide documentation in Tab O of the application package.
you, placed provide documentation in rab o of the application package.

4. Building-by-Building Information

Qualified basis must be determined on a building-by-building basis. Complete this section below. Building street addresses are required by the IRS (must provide by time of final allocation request).

1. 401 N. Illinois		100%	100%		09	
·6						
4.						
5.						
O						
.2						
. 6						
Totals	· <del>υ</del>			,		

<sup>\*</sup> Applicable Fraction used in the Credit Calculation will be based on the % of the development which is low income. The lessor of the total % based on total number of units or total square footage.

		ī								A STATE OF THE PARTY OF THE PAR
Andreas Andreas Services and Services S										
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Aggreen (miss helping-complete and the										s
	10.	1.	12.	13.	14.	15.	16.	17.	18.	Totals

5. Unit Information (Final Allocation request only)

Please provide the following unit information for each building.
Address of Building:

	***************************************							
 , ,	Š	<del>,</del>	5.	9.	7.	8,	·6	10.

footnotes:

Please provide the following unit information for each building. Address of Building:

THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O		

		Kilik-Savoy
6.	Election of the Minimum Set Aside Requirement (this election is also made by the owner on IRS Form 8609): The Owner irrevocably elects <b>one</b> of the Minimum Set Aside Requirements	2-25-05
	At least 20% of the rental residential units in this Development are rent restricted and to be occupied by individuals whose income is 50% or less of the area median gross income (if this election is chosen, all tax credit units must be rented to tenants at 50% area median income or be	pelow)
	X At least 40% of the rental residential units in this Development are rent restricted and to be occupied by individuals whose income is 60% or less of the area median gross income.	
	Deep Rent Skewing option as defined in Section 42.	

footnotes:

## O. Development Schedule

ALAGORIO (AOIVIVERSIA) ASSESSA AND AND AND AND AND AND AND AND AND AN	មានប្រជាជាក្នុងក្នុងក្នុងក្នុងក្នុងក្នុងក្នុងក្នុង	exercevaledes
1. Site		
Option/Contract		1-05
Site Acquisition		
Zoning		1-05
Site Plan Approval	10-05	
2. Financing		
a. Construction Loan		
Loan Application		1-05
Conditional Commitment		1-05
Firm Commitment	8-05	
Loan Closing	10-05	
b. Permanent Loan		······································
Loan Application		1-05
Conditional Commitment		1-05
Firm Commitment	8-05	
Loan Closing	1-08	
c. Other Loans and Grants		
Type & Source, List United Way		
Application Date		2-05
Conditional Commitment	3-05	
Firm Commitment	6-05	
d. Other Loans and Grants		
Type & Source, List HOME		
Application Date		11-04
Conditional Commitment		1-05
Firm Commitment	5-05	
e. Other Loans and Grants		
Type & Source, List		
Application Date		
Conditional Commitment		
Firm Commitment		:
3. Formation of Owner		
4. IRS Approval of Not-for-Profit Status		8-20-1979
5. Transfer of Property to Owner	7-05	
6. Plans and Specifications, Working Drawings	7-05	
7. Building Permit Issued by Local Government	9-05	
8. Construction Starts	10-5	
9. Completion of Construction	10-06	
10. Lease-Up	7-07	
11. Credit Placed in Service Date(s)		
(month and year must be provided)	10-06	

footnotes:			

## P. Extended Rental Housing Commitment (Please check all that apply) **Tax Credit** 1. X This development will be subject to the 15 year Extended Use Agreement in addition to the mandatory 15 year Compliance Period (30 years). This development will be subject to an additional (must be greater than 15 years) year Extended Use Agreement in addition to the mandatory 15-year Compliance Period. This development will be subject to the standard 15 year Compliance Period as part of a Lease Purchase Program (all units must be single family detached structures) and will offer homeownership opportunities to qualified tenants after compliance period. See IRS Revenue Ruling 95-48 and IHFA Declaration of Extended Rental Housing Commitment. Q. Special Housing Needs 1. Will this development be classified as Elderly Housing\*? X No Yes 2. Identify the number of units set aside for special housing needs below\*: ISASHI HIYER GO Homeless\* Persons with disabilities\* This requirement will be contained within the Declaration of Rental Housing Commitment recorded on the property. R. Community or Government Support 1. List the political jurisdiction in which the development is to be located and the name and address of the chief executive officer thereof: Political Jurisdiction (name of City or County) City of Indianapolis Chief Executive Officer (name and title) Mayor Bart Peterson Street Address 2500 City County Building City Indianapolis State Zip 46204 2. X A commitment for local government funding for this Development in the amount of 457,500 is located in Tab C of the application package. 3. X Letters from the local governing jurisdiction which states that the development supports neighborhood preservation and other organized community improvement and revitalization programs. and which describes the specific target area and the plans for its preservation and improvements is provided in Tab U of the application package. S. MBE/WBE Participation Minorities or woman materially participate in the Ownership, development or management of the Development by holding more than 51% interest in the Development Ownership, development entity, contractor or management firm. 2. The appropriate box(es) is checked below, and A Certification from the State of Indiana and applicable contractor agreements with Fee Structure is provided in Tab T of the application package, and footnotes: Value of donated land and buildings

			Kink-Savoy
	Evidence of the minority's Ownership into Owner is not a minority) to retain a minor application package.	erest, commitment from minority and ity as developer or manager is prov	2-25-05 d/or Owner's agreement (if ided in Tab T of the
	Owner Management Developer Contractor	Entity (2 yr. min contract)	
T. I	ncome and Expenses		
,	Rental Assistance     a. Do or will any low-income units receive rent	al assistance?	Yes X No
	If yes, indicate type of rental assistance and at	ach copy of rental assistance contra	act, if applicable:
	Section 8 HAP FmHA 515 R Section 8 Vouchers Other Section 8 Certificates	ental Assistance	
	b. Number of units (by number of bedrooms) re	eceiving assistance:	
	(1) Bedroom(2) Bedrooms(3) Bedrooms(4) Bedrooms		
	c. Number of years rental assistance contract	Expiration date of c	contract.
	d. Does locality have a public housing waiting	list?	X Yes No
	If yes, you must provide the following inform	ation:	
	Organization which holds the public housing	waiting list Indianapolis Housin	g Agency
	Contact person (Name and title)	ufus "Bud" Meyers, Executive Direct	ог
	Phone 26	61-7181 fax	261-7222
	e. What %, if any, of the units in the Developm certificates or vouchers or who are on public		HUD Section 8
	If a percentage of the units will be set aside please provide evidence that the developer with Section 8 rules and regulation; and the for tenants. (Please provide documentation	and/or Development manager are fa number and description of units to t	amiliar and knowledgeable se set aside
*	f. Has the Owner executed a written agreemer to give priority to households on waiting lists		using representative X Yes No
	If yes, please provide documentation in Tab	R of the application package.	
footn	otes:		

- 2. Utilities and Rents
  - a. Monthly Utility Allowance Calculations

				1.1246		(5,73)			
							1-121701		
	Electric	<u> </u>	Owner	X		 <u> </u>	36		 <u> </u>
Air Conditioning	***************************************		Owner	X		 	10	13	 
Cooking	Electric		Owner	Х	Tenant		5	7	
Lighting	Electric		Owner	Х	Tenant		21	24	
Hot Water	Electric	Г	Owner	X	Tenant	 Г	19	23	
Water	Municipal	Х	Owner	Г	Tenant	 Г			
Sewer	Municipal	Х	Owner	Г	Tenant				1
Trash	Private	Х	Owner		Tenant	 l			
		Αl	owance fo	r Co	sts Paid by	 _	04.00	A 440 BO	
	Tenant					\$	91.00	\$ 118.00	<u> </u>

b. S	ource o	f U	Itility	Allowance	Calculation
------	---------	-----	---------	-----------	-------------

Х	HUD	FmHA 515
	HUD PHA	Utility Company (Provide letter from utility company)

NOTE: IRS regulations provide further guidance on how utility allowances must be determined.

c. List below the applicable rental housing tax credit monthly rent limits (based on the number of bedrooms) less the applicable utility allowance calculated in subpart 2.a. above:

BIOLEAN SINGSOND AL STEPRENT AL CARROLLAND	2 5	ise.	<b>:</b> ];	14 X	il El Salla	2178
Maximum Allowable Rent for Tenants at 30% AMI		\$ 361	\$ 433			
Minus Utility Allowance Paid by Tenant		\$ 91	\$ 118		***************************************	
Equals Maximum Allowable rent for your Development	\$ -	\$ 270	\$ 315	\$	-	\$ -
Maximum Allowable Rent for Tenants at 40% AMI		\$ 481	\$ 577			
Minus Utility Allowance Paid by Tenant		\$ 91	\$ 118			
Equals Maximum Allowable rent for your Development	\$ -	\$ 390	\$ 459	\$	-	\$ -
Maximum Allowable Rent for Tenants at 50% AMI		\$ 601	\$ 721			
Minus Utility Allowance Paid by Tenant		\$ 91	\$ 118			
Equals Maximum Allowable rent for your Development	\$ _	\$ 510	\$ 603	\$	-	\$ -
Maximum Allowable Rent for Tenants at 60% AMI		\$ 722	\$ 866			
Minus Utility Allowance Paid by Tenant		\$ 91	\$ 118			
Equals Maximum Allowable rent for your Development	\$ -	\$ 631	\$ 748	\$	-	\$ -

footnotes:	

d. List below the maximum rent limits minus tenant-paid utilities for all HOME-Assisted, Trust Frund-Assisted, and/or HOME-Eligible, Non-assisted units in the development. (i.e., Trust Fund rent limits are the same as HOME rent limits.)

			1,000									
Maximum Allowable Rent for beneficiaries at 30% or less of area median income MINUS Utility Allowance Paid by Tenants					\$ \$	361 91	\$ \$	433 118				
Maximum Allowable Rent for Your Development	\$	_	\$	_	\$	270	\$	315	\$	-	\$	
Maximum Allowable Rent for beneficiaries at  40% or less of area median income  MINUS Utility Allowance Paid by Tenants  Maximum Allowable Rent for Your Development	•		ď.		\$	481 91	\$ \$	577 118	•		6	
Maximum Allowable Rent for beneficiaries at 50% or less of area median income MINUS Utility Allowance Paid by Tenants	Ψ		\$	-	\$ \$ \$	390 492 91	\$ \$	592 118	\$	-	\$	
Maximum Allowable Rent for Your Development	\$	-	\$	-	\$	401	\$	474	\$	-	\$	-
Maximum Allowable Rent for beneficiaries at 60% or less of area median income MINUS Utility Allowance Paid by Tenants					\$ \$	492 91	\$	592 118				
Maximum Allowable Rent for Your Development	\$	-	\$	-	\$	401	\$	474	\$	-	\$	-

	e.	<b>Estimated</b>	Rents	and Rental	Income
--	----	------------------	-------	------------	--------

1.	Total	Number	of I	Low-i	Income	Units
----	-------	--------	------	-------	--------	-------

\_\_\_18\_(30% Rent Maximum)

Yes/No	Yes/No	Yes/No	# of b	edrooms	ariida.Arii Careen takeadarreeks	anderstätte och sammer til	and the property of the state o		ริสต์ (1974)	SEM whitessissis
No	No	Yes	1	Bedrooms	1	16	552	270	\$	4,320
No	No	Yes	2	Bedrooms	1	2	817	315	\$	630
				Bedrooms					\$	-
				Bedrooms					\$	-
				Bedrooms					\$	_
				Bedrooms					\$	-
			Other Inc	ome Source ome Source ome Source				- - -		
			Total Mo	nthly Income					_\$_	4,950
			Annual Ir	icome					\$	59,400

footnotes:		

								17.5	
Yes/No	Yes/No	Yes/No	# of bedrooms	alimielikyhen etääjä					
No	No	Yes	1 Bedrooms	1	2	552	390	\$	780
			Bedrooms					\$	-
			Bedrooms					\$	-
			Bedrooms					\$	-
			Bedrooms					\$	-
			Bedrooms					\$	-
			Other Income Sou Other Income Sou Other Income Sou	ігсе			• •		
			Total Monthly Inco	ome				\$	780
			Annual Income					\$	9,360

3. Total number of Low-Income Units 31 (50% Rent Maximum)

Yes/No	Yes/No	Yes/No	# of	bedrooms				O THE STREET OF		
No	No	Yes	1	Bedrooms	1	26	552	510	\$	13,260
No	No	Yes	2	Bedrooms	2	5	968	603	\$	3,015
				Bedrooms					\$	-
				Bedrooms					\$	-
				Bedrooms					\$	-
				Bedrooms					\$	-
			Other	r Income Sou Income Sou Income Sou	ırce			•		
			Total	Monthly Inco	ome				_\$_	16,275
			Annu	al Income					_\$_	195,300

footnotes:
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	i e jedini. Najve				og programme of the second	A think				l Ya ii niji li
Yes/No	Yes/No	Yes/No	# of	bedrooms		TOTAL STATE OF THE	The state of the s	and the second s	***********	ring. Ad Industry Grandings
No	No	Yes	1	Bedrooms	1	7	552	590	\$	4,130
No	No	Yes	2	Bedrooms	2	2	1070	748	\$	1,496
				Bedrooms					\$	-
				Bedrooms					\$	-
				Bedrooms					\$	, <b>-</b>
				Bedrooms					\$	-
		Other I	ncome	Source Source Source		·				
Total Monthly Income									\$	5,626
	Annual Income								\$_	67,512

5. Total Number of Market Rate Units

	121		48.41					774	
Yes/No	Yes/No	Yes/No	# of bedrooms						25 75 0000000000
			Bedrooms					\$	-
			Bedrooms			1		\$	-
## 57476HE/4959	(agaga a o c		Bedrooms					\$	-
			Bedrooms					\$	-
			Bedrooms					\$	-
			Bedrooms					\$	-
			Other Income Source Other Income Source Other Income Source Total Monthly Income					\$	
			Annual Income	oine 				\$	-

footnotes:	

### 6. Summary of Estimated Rents and Rental Income

**Effective Gross Income** 

 Annual Income (30% Rent Maximum)
 \$ 59,400

 Annual Income (40% Rent Maximum)
 \$ 9,360

 Annual Income (50% Rent Maximum)
 \$ 195,300

 Annual Income (60% Rent Maximum)
 \$ 67,512

 Annual Income (Market Rate Units)
 \$ 

 Potential Gross Income
 \$ 331,572

 Less Vacancy Allowance
 7%
 \$ 23,210

OR

What is the estimated average annual % increase in income over the Compliance Period? 2%

\$

Commercial

308,362

#### U. Annual Expense Information

(Check one) X Housing

<u>Administrative</u>			<u>Op</u>	erating				
1. Advertising	\$	4,000	1.	Elevator		\$	4,800	•
2. Management	\$	18,502	2.	2. Fuel (heating & hot water)				
3. Legal/Partnership	\$	2,300	3.	Electricity		\$	13,200	
4. Accounting/Audit	\$	7,000	4.	Water/Sewer		\$	6,000	
5. Compliance Mont.	\$	7,000	5.	Gas		,,		
Total Administrative	\$	38,802	6.	Trash Removal		\$	2,400	
<u>Maintenance</u>			7.	Payroll/Payroll T	axes	\$	30,000	
1. Decorating	\$	2,400	. 8.	Insurance		\$	24,000	
2. Repairs	\$	18,000	9.	Real Estate Tax	es*	\$	45,000	
3. Exterminating	\$	23,700	10.	Other Tax				
4. Ground Expense	\$	7,500	. 11.	Annual Replace	ement	•	40.000	
5. Other	\$	2,400		Reserve		\$	18,000	
Total Maintenance	\$	54,000	-	Other		\$	142 400	
<b></b> . <b>.</b>				_		<del>:</del>	143,400	
Total Annual Administrative Expenses:			\$	38,802	Per Unit	\$	647	
Total Annual Maintenance Expenses:			\$	54,000	Per Unit		900	
Total Annual Operating	Expenses:		\$	143,400	Per Unit	\$	2,390	
TOTAL OPERATING EXPE	NSES (Administrative +	Operating + Ma	intenance)	\$	236,202	Per Unit	\$	3,9

\* List full tax liability for the property - do not reflect tax abatement.

What is the estimated average annual percentage increase in expenses for the next 15 years?

What is the annual percentage increase for replacement reserves for the next 15 years?

footnotes:			

3%

3%

#### V. Projections for Financial Feasibility

Check one: X Housing Commercial

ikā kira natiem partion kāra dēbāra utru čelako ir dien ku						arisas si				49.13.14.1
Potential Gross Income	\$	331,572	\$	338,203	\$	344,968	\$	351,867	\$	358,90
2. Less Vacancy Loss	\$	(23,210)	\$	(23,674)	\$	(24,148)	\$	(24,631)	\$	(25,123
3. Effective Gross Income (1-2)	\$	308,362	\$	314,529	\$	320,820	\$	327,236	\$	333,78
4. Less Operating Expenses	\$	(218,202)	\$	(224,748)	\$	(231,491)	\$	(238,435)	\$	(245,588
5. Less Replacement Reserves	\$	(18,000)	\$	(18,540)	\$	(19,096)	\$	(19,669)	\$	(20,259
6. Plus Tax Abatement	Т									
(increase by expense rate if applicable)										
7. Net Income (3-4-5+6)	\$	72,160	\$	71,241	\$	70,233	\$	69,132	\$	67,93
8.a. Less Debt Service #1	\$	42,985	\$	42,985	\$	42,985	\$	42,985	\$	42,98
8.b. Less Debt Service #2										
9. Cash Flow (7-8)	\$	29,175	\$	28,256	\$	27,248	\$	26,147	\$	24,94
10. Debt Coverage Ratio (7/(8a +8b))		1.68		1.66		1.63		1.61		1.58
11. Deferred Developer Fee Payment	\$	29,175	\$	28,256	\$	27,248	\$	26,147	\$	24,94
12. Cash Flow after Def. Dev. Fee Pmt.	\$	-	\$	-	\$	-	\$	-	\$	
13. Debt Coverage Ratio	$\top$	1.00		1.00		1.00		1.00		1.00
Potential Gross Income	\$	366,082	\$	373,404	\$	380,872	\$	388,489	\$	396,25
2. Less Vacancy Loss	\$	(25,626)	\$	(26,138)	\$	(26,661)	_	(27,194)		(27,73
3. Effective Gross Income (1-2)	\$	340,457		347,266		354,211		361,295		368,52
4. Less Operating Expenses	\$	(252,956)	\$	(260,545)		(268,361)	_	(276,412)		(284,70
5. Less Replacement Reserves	S	(20,867)		(21,493)		(22,138)		(22,802)		(23,48
6. Plus Tax Abatement	$\top$							. ,		<del></del>
(increase by expense rate if applicable)	-	·								
7. Net Income (3-4-5+6)	\$	66,634	\$	65,228	\$	63,712	\$	62,082	\$	60,33
8.a. Less Debt Service #1	\$	42,985	\$	42,985	\$	42,985	\$	42,985	\$	42,98
8.b. Less Debt Service #2						<del></del>				
9. Cash Flow (7-8)	\$	23,649	\$	22,243	\$	20,727	\$	19,097	\$	17,34
10. Debt Coverage Ratio (7/(8a+8b))	$\top$	1.55		1.52		1.48		1.44		1.40
11. Deferred Developer Fee Payment	\$	23,649	\$	22,243	\$	20,727	\$	19,097	\$	17,34
12. Cash Flow after Def. Dev. Fee Pmt.	\$		\$	-	\$	-	\$	-	\$	
13. Debt Coverage Ratio		1.00		1.00		1.00		1.00		1.00
									estadi.	
Potential Gross Income	\$	404,184		412,268		420,513		428,924		437,50
2. Less Vacancy Loss	\$	(28,293)	\$	(28,859)	\$	(29,436)	\$	(30,025)		(30,62
3. Effective Gross Income (1-2)	<b> </b>   <b>s</b>	375,892		383,409		391,078		398,899		406,8
4. Less Operating Expenses	\$	(293,245)		(302,043)		(311,104)		(320,437)		(330,05
5. Less Replacement Reserves	\$	(24,190)		(24,916)		(25,664)		(26,434)		(27,22
6. Plus Tax Abatement	$\top$							(,,		
(increase by expense rate if applicable)							İ			
	\$	58,456	\$	56,451	\$	54,310	\$	52,028	\$	49,60
7. Net Income (3-4-5+6)		42,985	_	42,985		42,985		42,985		42,98
7. Net Income (3-4-5+6) 8.a. Less Debt Service #1	\$		—				l			· · · · · ·
8.a. Less Debt Service #1	+				ŀ		l .			
8.a. Less Debt Service #1 8.b. Less Debt Service #2	\$		\$	13,466	\$	11,325	\$	9,043	\$	6.6
8.a. Less Debt Service #1 8.b. Less Debt Service #2 9. Cash Flow (7-8)		15,471 1.36	\$	13,466 1.31	\$	11,325 1.26	\$		\$	6,61 1.15
8.a. Less Debt Service #1  8.b. Less Debt Service #2  9. Cash Flow (7-8)  10. Debt Coverage Ratio (7/(8a+8b))		15,471 1.36		1.31		1.26		1.21		
8.a. Less Debt Service #1 8.b. Less Debt Service #2 9. Cash Flow (7-8)	\$	15,471 1.36 15,471								

The above Projections utilize the estimated annual percentage increases in income.

footnotes:

See DSC explantion

### Rink Savoy-Indianapolis

## Stabilized Debt Service Coverage Ratio

Stabilized Debt Service Coverage Ratios for the first mortgage loan are not within IHFA Underwriting Guidelines. After consideration of the payment on the Deferred Development Fee they are within IHFA Underwriting Guidelines.

Our purposeful decision was to not borrow as much money from a third party lender but instead to defer a significant portion of the development fee and to be patient for the repayment of that development fee from the successful operation of the apartments.

Page 35 of the RHTC application, the 15 year pro forma, reflects that the Deferred Development Fee will not be entirely repaid from available cash flow.

Over the fifteen-year initial RHTC compliance period our DSC on the first mortgage drops to 1.15.

We believe this financing structure addresses the long-term operating stability of the development. Again we think it more prudent to defer more of our development fee and not overburden the project with hard debt.

We have set-aside thirty percent of our units for extremely low-income households. Rents from these units do not even cover operating costs let alone debt service. Experience has shown us these households are likely to face higher turnover increasing our operating costs.

These units carry long compliance periods.

Ever-increasing property tax burdens and rising insurance costs, along with the cost to maintain the project to high quality standards over the entire compliance period, requires long range financial planning and preparation.

We feel our project financing structure addresses long-term operating stability and insures continued viability of the development.

Commercial and Office Space: IHFA Rental Housing financing resources cannot be used to finance commercial space within a development. Income generated and expenses incurred from this space, though, must be factored into IHFA's underwriting for the development as a whole when reviewing the application. If the development involves the development of commercial space the applicant will need to provide separate annual operating expense information and a separate 15-year proforma fro the commercial space. Be sure to label which forms are for the housing and which ones are for the commercial space. Also separate out all development costs associated with the commercial space on line M of the Development Costs chart.

# W. Sources of Funds/Developments (Include any IHFA HOME and/or Trust Fund requests)

1. Construction Financing. List individually the sources of construction financing including any such loans financed through grant sources. Please provide documentation in Tab G.

1 HOME	Jan-05	2/1/2005	\$ 235,000	Bruce Baird 327 5617
2 United Way	Jan-05	7/1/2005	\$ 1,000,000	James Taylor 633-8210
3 ESIC Equity	Jan-05	1/1/2005	\$ 3,775,000	Sanjeev Jaipuriar 410 772 2501
4 First Indiana Total Amount of Funds	Jan-05	Jan-05	 1,000,000 6,010,000	

2. Permanent Financing. List individually the sources of permanent financing including any such loans financed through grant sources. Please provide documentation in Tab G.

1 HOME	1-Jan	2/1/2005				AFR	20	20
2 United Way	Apr-05	7/1/2005	_	1,000,000		1.00%	30	30 30
3 First Indiana	Jan-05	Jan-05	\$	500,000	\$42,985	7.75%	30	18
4 Total Amount of Funds			\$	1,735,000				100
Deferred Developer Fee			\$	345,618		0.00%	15	15

3. Grants. List all grants provided for the development. Provide documentation in Tab G.

			a de la Partir de Calanda de Cala
1			
2		_	
3			
4 Total Amount of Funds		\$ -	

footnotes:	

Total Sources of	Permanent Funds	Committed	\$	1,735,000	_	
Total Annual Del	ot Service Cost	\$ 42,985				
4. Historic	Tax Credits					
Have you	applied for a Histo	oric Tax Credit?			X Yes	No
If Yes, P	ease list amount	\$ 1,275,164				
If Yes, indicate date Part I of application was duly filed: N/A (Must be included with application. Please provide in Tab U.)						
5. Other So	ources of Funds (	excluding any syn	dication pro	oceeds)		
a. Sourc	e of Funds	Deferred develo	pment fee		Amount	\$ 330,618
b. Timin	g of Funds	As needed				
c. Actua	l or Anticipated Na	ne of Other Sour	ce			
d. Conta	ct Person <u>Bill Gr</u>	ay		_ Phone	687-8996	· · · · · · · · · · · · · · · · · · ·
6. Sources	and Uses Recond	iliation				
Limited Partner Equity Investment* General Partner Investment Total Equity Investment Total Permanent Financing Deferred Developer Fee Other Historic credit equity Other		\$ \$ \$	3,784,300 3,784,300 1,735,000 345,618 1,185,903	- ] - - -		
	Total Source of F	unds		\$	7,050,821	]
	Total Uses of Fun	ds		\$	7,050,821	]
·	NOTE: Sources	and Uses MUST	EQUAL			
	*Load Fees includ Load Fees	ded in Equity Inve	estment		Yes	No
footnotes:	Building individua	lly listed on Natio	nal Registe	er, Part I no	t required	

# 7. Intermediary Information a. Actual or Anticipated Name of Intermediary (e.g., Syndicator, act.) Contact Person Sanjeev Jaipuriar Phone 410 964 0552 Street Address 10227 Wincopin Circle, Suite 800 City Columbia State MD Zip 21044-3400 b. Investors: Individuals and/or Corporate, or undetermined at this time c. As a percentage of the total credits to be received throughout the compliance period (assuming no recapture, should be the annual amount of credit times 10), how much are investors (excluding Owner's own equity) willing to invest toward development costs, excluding all syndication fees or charges? 83.4% check if estimated X check if based on commitment(s); if so please attach copies d. Has the intermediary (identified above) provided you with any documentation regarding the amount of syndication or other intermediary costs, fees, "loads" or other charges it will impose in with its services? Yes X No If yes, please attach copies e. How much, if any, is the Owner willing or committed to invest toward Development Costs? \$ 345,618 Evidence of investment must be provided to IHFA. 8. Tax-Exempt Bond Financing/Credit Enhancement a. If Multi-family Tax Exempt Bonds are requested, list percent such bonds represent of the aggregate basis of the building and land of the development: If this percentage is 50% or more, a formal allocation of credits from IHFA is not necessary (although the development must satisfy and comply with all requirements for an allocation under this Allocation Plan and Section 42 of the Code. The Issuer of the bonds must determine the maximum amount of credits available to the development which, just as for developments which do need allocation, is limited to the amount of credits necessary to make the development financially feasible). AT THE TIME OF SUBMITTING THIS APPLICATION, YOU MUST PROVIDE IHFA WITH AN OPINION OF COUNSEL, SATISFACTORY TO IHFA, THAT YOU ARE NOT REQUIRED TO OBTAIN AN ALLOCATION OF TAX CREDITS FROM IHFA AND THAT THE DEVELOPMENT MEETS THE REQUIREMENTS OF THE ALLOCATION PLAN AND CODE. footnotes:

Rink-Savoy

	Name of Issuer				
	Street Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			······
	City	State		Zip	
	Telephone Number		_ Fax Number	···	
C.	Name of Borrower				
	Street Address				
	City	State		Zip	
	Telephone Number		Fax Number		
	If the Borrower is not the	Owner, explain the relat	ionship between t	he Borro	ower and Owner.
	If Development will be upon the entire development	utilizing Multi-family Ta ent team in addition to	ax Exempt Bonds above.	s, you m	nust provide a list
d.	Does any of your financing If yes, list which financing			Yes	x No
e.	Is HUD approval for trans If yes, provide copy of TF	sfer of physical asset red A request to HUD.	quired?	Yes	x No
f.	Is the Development a fed its units in danger of bein to eligible prepayment, co If yes, please provide doo	g removed by a federal onversion, or financial di	agency from the le	ow-incor Yes	with at least 50% of ne housing market d x No
f.	its units in danger of bein to eligible prepayment, co	g removed by a federal onversion, or financial di	agency from the le	ow-incor Yes	ne housing market d
f.	its units in danger of bein to eligible prepayment, co	g removed by a federal onversion, or financial di	agency from the le	ow-incor Yes	ne housing market d
f.	its units in danger of bein to eligible prepayment, co	g removed by a federal onversion, or financial di	agency from the le	ow-incor Yes	ne housing market d
f.	its units in danger of bein to eligible prepayment, co	g removed by a federal onversion, or financial di	agency from the le	ow-incor Yes	ne housing market d
f.	its units in danger of bein to eligible prepayment, co	g removed by a federal onversion, or financial di	agency from the le	ow-incor Yes	ne housing market d
f.	its units in danger of bein to eligible prepayment, co	g removed by a federal onversion, or financial di	agency from the le	ow-incor Yes	ne housing market d
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#### X. Cost/Basis/Maximum Allowable Credit

1. Development Costs - List and Include Eligible Basis by Credit Type

			State and the state of the stat
a.	To Purchase Land and Bidgs.  1. Land 2. Demolition 3. Existing Structures 4. Other (specify)		
b.	For Site Work		
	Site Work (not included in Construction Contract)     Other(s) (Specify)	240,000	
c.	For Rehab and New Construction (Construction Contract Costs)  1. Site Work  2. New Building		
	New Building     Rehabilitation	4,468,136	4,468,136
	4. Accessory Building	1,735,765	4,400,130
	5. General Requirements*	268,088	268,088
	6. Contractor Overhead*	89,363	89,363
	7. Contractor Profit*	268,088	268,088
d.	For Architectural and Engineering Fees		
i	1. Architect Fee - Design	250,000	250,000
	2. Architect Fee - Supervision	76,500	76,500
	<ul><li>3. Consultant or Processing Agent</li><li>4. Engineering Fees</li></ul>	20,000	00.000
	5. Other Fees (specify)	20,000	20,000
e.	Other Owner Costs  1. Building Permits		
	2. Tap Fees		0
	3. Soil Borings		0
	4. Real Estate Attorney	20,000	20,000
	5. Construction Loan Legal	10,000	10,000
	<ul><li>6. Title and Recording</li><li>7. Other (specify)</li></ul>	15,000	15,000
	ANTERIORIE WILLOAES DE ATENTE	計劃機劃原子及25A7年。 第18章	

<sup>\*</sup> Designates the amounts for those items that are limited, pursuant to the Allocation Plan

footnotes:		

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		EphHebbleecust est		
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f.	For Interim Costs			
	Construction insurance	25,000		25,000
	Construction Interest & Other Capitalized			
	Operating Expenses	106,646		106,646
	3. Construction Loan Orig. Fee	25,000		25,000
	Construction Loan Credit Enhancement			
	Taxes/Fixed Price Contract Guarantee			
g.	For Permanent Financing Fees & Expenses			
	1. Bond Premium			
	2. Credit Report			
	3. Permanent Loan Orig. Fee	10,000		
	4. Permanent Loan Credit Enhancement			
	5. Cost of Iss/Underwriters Discount			
	6. Title and Recording			
	7. Counsel's Fee	20,000		
	8. Other (Specify)			
h.	For Soft Costs			
	1. Property Appraisal	6,000		6,000
	2. Market Study	6,000		6,000
	3. Environmental Report	6,000		6,000
	4. IHFA Fees	30,000		0,000
	5. Consultant Fees	50,000		50,000
	6. Other (specify)			00,000
	Cost certification \$10,000 Survey 6,000	16,000		16,000
l.	For Syndication Costs			70 07 <b>0 60 163 163 163 163</b> 170 2
•	Organizational (e.g. Partnership)			16 / B 1   1677   114   1   175 / 7
	2. Bridge Loan Fees and Exp			
	3. Tax Opinion	25,000		
	4. Other (specify)			
	***			
ĵ.	Developer's Fee*			
	51 % Not-for Profit			
	49 % For-Profit	850,000		850,000
		300,300		000,000
k.	For Development Reserves			
	Rent-up Reserve	50,000		
	2. Operating Reserve	100,000		
	Alle Essing			
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<sup>\*</sup> Designates the amounts for those items that are limited, pursuant to the Allocation Plan.

footnotes:		

Rink-Savoy

**25-05 Total Commercial Costs\*** Total Dev. Costs less Comm. Costs (I-m) 7,050,821 Reductions in Eligible Basis Subtract the following: 1. Amount of Grant(s) used to finance Qualifying development costs 2. Amount of nonqualified recourse financing 3. Costs of nonqualifying units of higher quality (or excess portion thereof) 4. Historic Tax Credits (residential portion) 1,275,164 0 5. Subtotal (o.1 through 4 above) 1,275,164 Eligible Basis (Il minus o.5) 0 5,300,657 **High Cost Area** Adjust to Eligible Basis (ONLY APPLICABLE IF development is in a Census Tract or difficult development area) Adjustment Amount X 30% Adjusted Eligible Basis (p plus q) 0 5,300,657 **Applicable Fraction** (% of development which is low income) Based on Unit Mix or Sq Ft. (Type U or SF) 100.00% Total Qualified Basis (r multiplied by s) 0 5,300,657 Applicable Percentage (weighted average of the applicable percentage for each building and credit type) 9.00% Maximum Allowable Credit under IRS sec 42 (t multiplied by u) 0 477,059 Combined 30% and 70% PV Credit w. 477,059

Note: The actual amount of credit for the Development is determined by IHFA. If the Development is eligible for Historic Tax Credit, include a complete breakdown of the determination of eligible basis for the Historic Credit with the Application. If the Development's basis has been adjusted because it is in a high cost or qualified census tract, the actual deduction for the Historic Cost items must be adjusted by multiplying the amount by 130%. This does not apply to Historic Tax Credits.

footnotes:	

<sup>\*</sup> Commercial costs are defined as those costs that are not eligible basis and are attributed to non-residential areas of the Development (e.g. retail area of mixed-use development).

#### 2. Determination of Reservation Amount Needed

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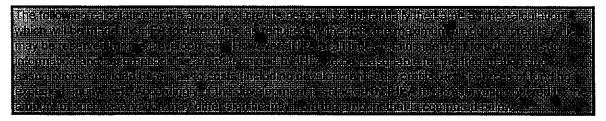
a.	TOTAL DEVELOPMENT COSTS	\$ <u>7,050,821</u>
b.	LESS SYNDICATION COSTS	\$ 25,000
c.	TOTAL DEVELOPMENT COSTS (a - b)	\$ <u>7,025,821</u>
d.	LESS: TOTAL SOURCES OF FUNDING EXCLUDING SYNDICATION PROCEEDS	\$ 2,920,903
e.	EQUITY GAP (c - d)	\$ <u>4,104,918</u>
f.	EQUITY PRICING PERCENTAGE (Percentage of 10-year credit expected to be personally invested by you or raised as equity excluding syndication or similar costs to 3rd parties)	\$ <u>0.834369</u>
g.	10-YEAR CREDIT AMOUNT NEEDED TO FUND THE EQUITY GAP (e/f)	\$ <u>4,919,787</u>
h.	ANNUAL TAX CREDIT REQUIRED TO FUND EQUITY GAP (g/10)	\$ <u>491,979</u>
l.	MAXIMUM ALLOWABLE CREDIT AMOUNT	\$ <u>477,059</u>
j.	RESERVATION AMOUNT (Lesser of h or j)	\$ <u>477,059</u>
k.	TOTAL EQUITY INVESTMENT (anticipated for intial app)	\$ 3,784,300
l.	DEFERRED DEVELOPER FEE	\$ 345,618
m.	FINANCIAL GAP	\$ -25,000
	CREDIT PER UNIT     (j/Number of Units)	\$ <u>7951</u>
	CREDIT PER BEDROOM     (j/Number of Bedrooms)	\$ <u>6914</u>
	COST PER UNIT     a - (Cost of Land + Commercial Costs + Historic Credits)     Total Number of Units	\$ <u>96,261</u>

footnotes:

Does not calculate item h with deferred development fee, see adjusted calculation

# Calculation with defened development fee

2. Determination of Reservation Amount Needed



a.	TOTAL DEVELOPMENT COSTS	\$ <u>7,050,821</u>
b.	LESS SYNDICATION COSTS	\$ 25,000
C.	TOTAL DEVELOPMENT COSTS (a - b)	\$ 7,025,821
d.	LESS: TOTAL SOURCES OF FUNDING EXCLUDING SYNDICATION PROCEEDS	\$ 2,920,903
e. f.	EQUITY GAP (c - d) Less defened Lee  EQUITY PRICING PERCENTAGE  (Percentage of 10-year credit expected to be personally invested by you or raised as equity excluding syndication or similar costs to 3rd parties)	\$ 4,104,918 345,618 3,759,300 \$ 0.834369
g.	10-YEAR CREDIT AMOUNT NEEDED TO FUND THE EQUITY GAP (e/f)	\$ 4,919,787 4,505,500
h.	ANNUAL TAX CREDIT REQUIRED TO FUND EQUITY GAP (g/10)	\$ 491,979 450,556
1.	MAXIMUM ALLOWABLE CREDIT AMOUNT	\$ 477,059
j.	RESERVATION AMOUNT (Lesser of h or j)	\$ <u>477,059 450,55</u> 6
k.	TOTAL EQUITY INVESTMENT (anticipated for intial app)	\$ 3,784,300
1.	DEFERRED DEVELOPER FEE	\$ 345,618
m.	FINANCIAL GAP	\$ <u>-25,000</u>
8	1. CREDIT PER UNIT (j/Number of Units) 60	\$ 7951 7509
	2. CREDIT PER BEDROOM (p/Number of Bedrooms)	\$ 6914 6,530
	COST PER UNIT <u>a - (Cost of Land + Commercial Costs + Historic Credits)</u> Total Number of Units	\$ <u>96,261</u>

footnotes:

Does not calculate item h with deferred development fee, see adjusted calculation

#### The undersigned hereby acknowledges that:

- 1. This Application form, provided by IHFA to applicants for funding, including the sections herein relative to basis, credit calculations and determinations of the amount of the credit necessary to make the development financially feasible, is provided only for the convenience of IHFA in reviewing the reservation requests; completion hereof in no way guarantees eligibility for the credits or ensures that the amount of credits applied for has been computed in accordance with IRC requirements; and that any notations herein describing IRC requirements are offered only as general guides and not as legal authority;
- The undersigned is responsible for ensuring that the proposed development will be comprised of qualified low-income buildings; that it will in all respects satisfy all applicable requirements of federal tax laws and any other requirements imposed upon it by the IHFA; and that the IHFA has no responsibility that all or any funding allocated to the development may not be useable or may later be recaptured;
- 3. For purposes of reviewing this Application, IHFA is entitled to rely upon the representation of the undersigned as to the inclusion of costs in eligible basis and as to all of the figures and calculations relating to the determinations of qualified basis for the development as a whole and for each building therein individually as well as the amounts and types of credit applicable thereto, and that the issuance of a reservation based on such representations in no way imposes any responsibility on the IHFA for their correctness or compliance with IRC requirements;
- 4. The IHFA offers no advise, opinion or guarantee that the Applicant or the proposed development will ultimately qualify for or receive low-income housing tax credits, Multi-family tax exempt Bonds, HOME, 501(c)3 Bonds;
- 5. Allocations of funding are not transferable without prior written notice of the IHFA; and
- 6. The requirements for applying for funding and the terms of any reservation or allocation thereof are subject to change at any time by federal or state law, federal, state or IHFA regulations, or other binding authority.
- 7. Applicant is submitting this Application on behalf of Owner, whether Owner has already been formed or is a to-be-formed entity.
- 8. Applicant represents and warrants to IHFA that it has all necessary authority to act for, obligate and execute this Application on behalf of itself and Owner, and to engage in all acts necessary to consummate this Application. Applicant further represents and warrants to IHFA that the signatories hereto have been duly authorized and that this Application shall be valid and binding act of the Applicant, enforceable according to its terms.
- 9. In the event the Applicant is not the Owner, Applicant represents and warrants to IHFA that it will take, and not fail to take, any and all necessary to cause the Owner to ratify and confirm and comply with the terms and conditions of this Application.
- 10. Applicant represents and warrants to IHFA that it will take any and all action necessary and not fail to cause the Developer to ratify and confirm and comply with the terms and conditions of this Application

#### Further, the undersigned hereby certifies that:

- All factual information provided herein or in connection herewith is true, correct and complete, and all estimates are reasonable;
- b) It shall promptly notify the IHFA of any corrections or changes to the information submitted to the IHFA in connection with this Application upon becoming aware of same;
- c) It is responsible for all calculations and figures to the determination of the eligible basis and qualified basis for any and all buildings and other improvements, and it understands and agrees that the amount of funding to be reserved and allocated has been calculated pursuant to and in reliance upon the representations made within;

Rink-Savoy

- It will at all times indemnify and hold harmless IHFA against claims, losses, costs, damages, expenses and liabilities of any nature (including, without limitation, attorney fees and attorney fees to enforce the indemnity rights hereunder) directly or indirectly resulting from, arising out of or relating to IHFA's acceptance, consideration, approval or disapproval of this Application and the issuance or non-issuance of an allocation of funding in connection herewith.
- It shall furnish the IHFA with copies of any and all cost certifications made to any other governmental agency, including, but not limited to, cost certifications made to FmHA or FHA, at the time that such certifications are furnished to such other agency.
- 7. Applicant hereby authorizes IHFA and its successors, affiliates, agents and assigns to utilize in any manner and at anytime, any photograph, picture, or other medium (collectively "photographs") of the property covered by this Application, without limitation, in any and all matters, publications, or endeavors, commercial or noncommercial, undertaken directly or indirectly by IHFA at any time on or after the date of this Application without any limitation whatsoever. Applicant understands that: (1) it is relinquishing any and all ownership rights in any such photograph, picture or medium to IHFA; and (ii) it is relinquishing any and all legal rights that it may now or hereafter have to, directly or indirectly, challenge, question or otherwise terminate the use of the photograph by IHFA.
- DISSEMINATION OF INFORMATION and AGREEMENT TO RELEASE AND INDEMNIFY. The undersigned for and on behalf of itself, the Development, Owner and all participants in the Development, together with their respective officers, directors, shareholders, members, partners, agents, representatives, and affiliates (collectively, "Applicant") understands, acknowledges and agrees that this and any application for Rental Housing Tax Credits ("Credits") (including, but not limited to, all preliminary final Applications, related amendments and information in support thereof and excepting personal financial information) are available for dissemination and publication to the general public.

In addition, as additional consideration for IHFA's review of its request for Credits, the Applicant does hereby release IHFA and its directors, employees, attorneys, agents and representatives of and from any and all liability, expense (including reasonable attorney fees) and damage that it may, directly or indirectly, incur because of such dissemination or publication, and the Applicant hereby agrees to indemnify and hold IHFA harmless of and from any and all such liability, expense or damage.

IN WITNESS WHEREOF, the undersigned, being duly au its name on this day of,	thorized, has caused this document to be executed in
APPLICANT IS <u>NOT</u> OWNER	
-	Legal Name of Applicant
Ву:	denotes the second seco
Printed Name:	
Its:	

Rink Savoy STATE OF INDIANA ) 2-25-05 ) SS: COUNTY OF \_\_\_\_\_) Before me, a Notary Public, in and for said County and State, personally appeared, of \_\_\_\_\_), the Applicant in the foregoing Application for Reservation (current year) funding, who acknowledged the execution of the foregoing instrument as his (her) voluntary act and deed, and stated, to the best of his (her) knowledge and belief, that any and all representations contained therein are true. Witness my hand and Notarial Seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_, My Commission Expires: Notary Public My County of Residence: Printed Name (title) **APPLICANT IS OWNER** Riley Area Development Corporation (RADC) Legal Name of Applicant Printed Name: William B. Gray Its: Executive Director SUSAN VOGT Res. of Marion Co. Comm. Exp. 10-19-08 STATE OF INDIANA ) COUNTY OF Marion Before me, a Notary Public, in and for said County and State, personally appeared, William B. Gray (the Executive Director of Riley Area Development), the Applicant in the foregoing Application for Reservation of 2005 (current year) funding, who acknowledged the execution of the foregoing instrument as his (her) voluntary act and deed, and stated, to the best of his (her) knowledge and belief, that any and all representations contained therein are true. Witness my hand and Notarial Seal this 25th day of February My Commission Expires: 10/19/2008

Susan Vogt

Printed Name

(title)

My County of Residence:

Marion

#### Z. Statement of Issuer/Applicant (For Multi-family Tax Exempt Bonds only)

The undersigned hereby acknowledges that:

- This Application form, provided by IHFA to applicants for tax credits and tax-exempt bonds, including the sections herein relative to basis, credit calculations and determinations of the amount of the credit necessary to make the development financially feasible, is provided only for the convenience of IHFA in reviewing the reservation requests; completion hereof in no way guarantees eligibility for the credits or bonds or ensures that the amount of credits applied for has been computed in accordance with IRC requirements; and that any notations herein describing IRC requirements are offered only as general guides and not as legal authority;
- The undersigned is responsible for ensuring that the proposed bond issue will in all respects satisfy all applicable requirements of federal tax laws and any other requirements imposed upon it by the IHFA; and that the IHFA has no responsibility that all or any of the funds allocated to the Development may not be useable or may later be recaptured;
- For purposes of reviewing this Application, IHFA is entitled to rely upon the representation of the undersigned as to the inclusion of costs in eligible basis and as to all of the figures and calculations relating to the determinations of qualified basis for the development as a whole and for each building therein individually as well as the amounts and types of credit applicable thereto, and that the issuance of a reservation based on such representations in no way imposes any responsibility on the IHFA for their correctness or compliance with IRC requirements;
- 4. IHFA may request or require changes in the information submitted herewith, may substitute its own figures which it deems reasonable for any or all figures provided herein by the undersigned and may reserve credits, if any, in an amount significantly different from the amount requested;
- The IHFA offers no advice, opinion or guarantee that the Issuer or the proposed development will ultimately
  qualify for or receive funds;
- 6. Reservations of funds are not transferable without prior written consent of IHFA;
- 7. If the IHFA believes, in its sole discretion, that the Development will not be completed or that any condition set forth in the Application will not be satisfied within the required time period, or will become unsatisfied or will otherwise cause the Development to fail to qualify for a Bond allocation, the Issuer agrees that the IHFA may rescind and retrieve any funds allocated to the Issuer. The Issuer acknowledges that all terms, conditions, obligations and deadlines set forth in this Application constitute conditions precedent to any allocation of funds, and the Development's failure to comply with any of such terms and conditions shall entitle the IHFA, in its sole discretion, to deem the allocation canceled by mutual consent. After any such cancellation, the Issuer acknowledges that neither it nor the Development will have any right to claim funds. The IHFA reserves the right, in its sole discretion, to modify and/or waive any such failed condition precedent, so long as such waiver does not violate any Code requirements relating to the Development;
- 8. The requirements for applying for funds and the terms of any reservation or allocation thereof are subject to change at any time by federal or state law, federal, state or IHFA regulations, or other binding authority; and
- Reservations may be subject to certain conditions to be satisfied prior to allocation and shall in all cases be contingent upon the receipt of the required Application and reservation fees.
- Applicant is submitting this Application on behalf of Owner, whether Owner has already been formed or is to-be-formed entity.
- 11. Applicant represents and warrants to IHFA that it has all necessary authority to act for, obligate and execute this Application on behalf of itself and Owner, and to engage in all acts necessary to consummate this Application. Applicant further represents and warrants to IHFA that the signatories hereto have been duly authorized and that this Application shall be the valid and binding act of the Applicant, enforceable according to its terms.
- 12. In the event Applicant is not the Owner, Applicant represents and warrants to IHFA that it will take, and not fail to take, any and all action necessary to cause the Owner to ratify and confirm and comply with the terms and conditions of this Application.
- 13. Applicant represents and warrants to IHFA that it will take any and all action necessary and not fail to cause the Developer to ratify and confirm and comply with the terms and conditions of this Application.

Further, the undersigned certifies that:

- All factual information provided herein or in connection herewith is true, correct, and complete, and all estimates are reasonable;
- b) It shall promptly notify the IHFA of any corrections or changes to the information submitted to the IHFA in connection with this Application upon becoming aware of same;
- c) It is responsible for all calculations and figures relating to the determination of the eligible basis and qualified basis for any and all buildings and other improvements, and it understands and agrees that the amount of funds to be reserved and allocated has been calculated pursuant to and in reliance upon the representations made herein; and
- d) It will at all times indemnify and hold harmless IHFA against all claims, losses, costs, damages, expenses and liabilities of any nature (including, without limitations attorney fees and attorney fees to enforce the indemnity rights hereunder) directly or indirectly resulting from, arising our of or relating to IHFA's acceptance, consideration, approval or disapproval of this Application and the issuance or non-issuance of an allocation of funds in connection herewith.

IN WITNESS WHEREOF, the undersigned, being duly autits name on this day of	
	Legal Name of Issuer
	Ву:
Printed Na	me:
	Its:
STATE OF INDIANA ) ) SS:	
COUNTY OF)	
Before me, a Notary Pubic, in and for said County and State, p (the of (current year) funding, who acknowledged th voluntary act and deed, and stated, to the best of his (her) kno contained therein are true.	), the Applicant in the foregoing Application for Reservation execution of the foregoing instrument as his (her)
Witness my hand and Notarial Seal this	, day of,
My Commission Expires:	
	Notary Public
My County of Residence:	Printed Name (title)